

# CheckUp

this month

## PennCARE<sup>SM</sup> Partners Ease Access for Bethlehem Residents

LEHIGH VALLEY HOSPITAL AND HEALTH NETWORK (LVHHN) AND MUHLENBERG HOSPITAL CENTER, members of PennCARE<sup>SM</sup>, established a new home care service to benefit Bethlehem residents. A program of Lehigh Valley Home Care, Muhlenberg Home Health opened Feb. 28 and is staffed primarily by Muhlenberg Hospital Center employees. Lehigh Valley Home Care provides speech therapy and management services.

According to William Dunstan, administrator, Lehigh Valley Home Care,

"Muhlenberg Home Health illustrates the true spirit of the PennCARE<sup>SM</sup> partnership with each partner contributing a resource that benefits the community. Greater Bethlehem residents receive the benefits of an established, quality home health program delivered by health professionals from Muhlenberg Hospital Center in their own neighborhood." Lehigh Valley Home Care was established in 1962 and has expanded to eight satellite locations.

Lehigh Valley Home Care staff worked with Muhlenberg Hospital Center for about six months before Muhlenberg Home Health opened, providing education and management services. Lehigh Valley Home Care employees



Muhlenberg Home Health Branch Manager Deborah Search, R.N., reviews Doppler equipment for pulse checks with two Muhlenberg Hospital Center staff members: (from left) Chris Hess, R.N. and Karen Allwein, R.N. in preparation for opening a home health service at the Bethlehem facility.

Dawn Roth, financial clerk, and Deborah Search, R.N., manager, both now work at Muhlenberg Home Health. The home health staff at Muhlenberg reports that patients and physicians are pleased to have this service offered so close to them. "It is evident that the home health nurses we selected are very well known and well liked by their peers and physicians," Search said. Some patients have recognized the home health nurses as familiar faces who cared for them during earlier hospitalizations." Search adds that Muhlenberg Home

Health brings the PennCARE<sup>SM</sup> partnership to a staff level.

Muhlenberg Home Health program offers services to patients whose care does not require all of the resources of the hospital. Examples include patients and families who need assistance during an acute illness and after hospitalization to live independently at home; have a disability or chronic condition such as heart and lung disease, muscle-nerve problem, or bone and joint disorder that requires the need for a skilled professional; or require assistance in their home after surgery.

For more information about home care services, call 402-CARE. ■

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## Major Construction Project at CC Re-evaluated

THE PLANNING OF A MULTI-STORY ADDITION AT CEDAR CREST & I-78 IS BEING RE-EVALUATED to consider more appropriate options in light of current and forecasted utilization and economic trends in the health care environment, according to Louis Liebhaber, Chief Operating Officer. The issue of how to house inpatient ob/gyn services, inpatient psychiatry and ambulatory diagnostics and testing services will be carefully reviewed.

"Given the volatility and uncertainty of market conditions, we are rethinking the timing and size of any future building programs," Liebhaber said. "We are committed to the continued consolidation of acute inpatient services at Cedar Crest and a strong ambulatory presence at 17th & Chew. But we need additional time and study to best determine how to use this community's resources."

Options for the proposed addition being considered include constructing a smaller building or renovating existing space in the hospital to accommodate relocated services. These options will be discussed at a special senior management council meeting in late April, and it is quite likely that definitive action will be delayed.

In 1994, the board of trustees of LVHHN authorized funding for a three- to five- year multi-phased functional and facilities plan with the caveat that the plan would be flexible and allow for changes in the health care environment.

"When we developed these plans, we didn't have a crystal ball. We knew we would constantly have to test our assumptions to make sure we were still on the right track," said Liebhaber. "We have almost completed the first two phases of the plan. From a budgetary standpoint, all projects have come in right where we expected them to."

The first and second phases included the renovation of obstetrics and the dental clinic, and the creation of the transitional skilled unit at 17th & Chew. Inpatient pediatrics and the GI lab were also relocated to Cedar Crest & I-78. Most laboratory services will be consolidated at 2024 Lehigh Street in a soon-to-be-completed addition.

Since the planning initiative began in 1994, much has changed in the health care arena. LVHHN launched Operations Improvements to achieve cost savings and has made significant progress on the non-personnel side. However,

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## Education

### Organizational Development Information

#### CPR Certification

CPR certification will be held in two parts, and attendance is required at both. Part I will be held Wednesday, May 1, from 9 a.m. to noon in Room 900, School of Nursing, 17th & Chew. Part II will be held Wednesday, May 8, from 9 a.m. to noon, same location.

To register, complete and return the appropriate form located in the monthly OD calendar outside Room 900, School of Nursing, 17th & Chew, or outside the AV Services area, Cedar Crest & I-78, or call ext. 3053.

#### CPR Recertification

CPR recertification will be held in the 24-hour period beginning at 10 a.m. on Wednesday, April 24 at Cedar Crest & I-78, Nursing Learning Lab, 2nd floor GSB.

### Symposium Series—The Center For Educational Development

The Center for Educational Development and Support has announced the next topic of the regional symposium series to be held in the auditorium at Cedar Crest & I-78. For more information or to register, call ext. 1210.

**The 16th Annual Update in Cardiology will be held May 2. ■**

### Congratulations to...

... **Robert Leshko, R.R.T.**, who was selected March employee of the month by respiratory care's reward and recognition committee, Cedar Crest & I-78.

... **Thomas DeMark, Frederick Wieand, Martha Kissinger, Kristen Smith and David Gessner** who passed the national Respiratory Care Pediatric Exam and received their certification in pediatric respiratory care.

### Construction Project

*continued from page 1*

savings have lagged on the staffing side, and to correct this imbalance, staffing expenses must be reduced by nearly \$13 million in fiscal year 1997. In addition, health care has been dramatically altered by managed care. This has resulted in decreased hospital admissions, shorter lengths of stay and a growing number of health plan options. LVHHN has responded by developing Valley Preferred, a cost-effective business health care product and by forming PennCARE<sup>SM</sup>, the health partnership of physicians and eight hospitals. While these developments position LVHHN to thrive in a changing health care environment, it will take some time for these programs to show results. "At this point, we cannot predict the impact of managed care. It just makes sense to watch how the market shakes out," Liebhaber said. ■

## Employee Forums Promote Discussion of Issues

EMPLOYEE FORUMS HELD IN LATE FEBRUARY GAVE LOU LIEBHABER AND EMPLOYEES THE CHANCE TO DISCUSS some current issues and concerns at Lehigh Valley Hospital and Health Network (LVHHN). Nearly 400 staff workers and supervisors attended the meetings held at both hospital sites.

At each meeting, Liebhaber presented LVHHN's costs versus the competition's and explained the need to quickly and drastically trim expenses in order to position us to compete effectively in the managed care arena. Operations improvement, he said, is a key to achieving a major cost reduction.

Because the issues raised in the meetings relate to many areas of LVHHN, the most often-asked questions have been listed below along with the responses Liebhaber provided. Also included are questions employees at the forums asked to be included in *CheckUp*, and their answers.

#### **Q Didn't we spend too much remodeling the lobby at Cedar Crest?**

**A** We renovated to provide a new GI lab and because the lobby is more than 20 years old and badly needed a facelift. The costs were not taken out of operating revenue, but are part of our capital budget. We will have to be sensitive to making only essential capital expenditures while ensuring that our facilities are always kept up-to-date. Adequate, welcoming, functional facilities are part of remaining strong and competitive.

#### **Q I heard that 300 employees will be laid off. Is this true?**

**A** We have no plans to lay off 100, 200 or 300 people. However, as we examine our expenses, we see that about 60 percent are tied to salaries and benefits. Since we must reduce our costs in the hospital division if we are to survive in this environment dominated by cost competitiveness, this will undoubtedly impact a number of positions. We will continue going to great lengths to help affected employees transition to a new job inside or outside the network. Our history of treating everyone with dignity and respect will not be compromised.

#### **Q Is it true that within the next 12-14 months there will be a \$13 million cut from both sites? Where will this come from?**

**A** As you might have learned recently, nearly \$13 million must be trimmed from hospital division staffing costs in fiscal year 1997. We have made progress in reducing non-personnel expenses of OI, but must trim staffing costs to meet OI targets. The managers developing the plan to reduce expenses are examining issues such as staffing compared to external benchmarks, productivity levels, contribution of programs and services to our mission and cost position, pay practices, staff mix, and wage and benefit standards. The group is scheduled to recommend to senior management council a combination of initiatives as the fairest and most effective approach to achieving these savings, and the plan will be announced organization-wide in May. The strategy will not focus on a single employee group, department or benefit program, but will affect all staff, some employees and programs more dramatically than others.

Continually examining how to maximize the enormous contribution each of us brings to our job while bringing our staffing costs in line with our competition is ongoing and necessary to assure our continued contribution to the health of our community.

#### **Q LVHHN doesn't advertise as much as the other local hospitals. Why?**

**A** We recently kicked off a major advertising campaign for Valley Preferred that targets regional businesses that provide health care to their employees. You've probably seen the newspaper ads and billboards promoting the plan. Also, a current series of newspaper ads promotes our cardiac and cancer programs.

The magazines we publish quarterly and distribute through the mail and the newspapers reach hundreds of thousands of households in our service area. And they've been quite successful in bringing patients to our doctors and network services, both inpatient and outpatient. Finally, word-of-mouth publicity is also quite effective. We rely on employees, physicians and former patients to promote the health network to their friends, family, neighbors and colleagues.

#### **Q Is our decline in admissions linked to fewer managed care contracts?**

**A** We knew that not having a U.S. Healthcare contract hurt our census, because they are a major HMO in the Lehigh Valley. Since PennCARE<sup>SM</sup> has contracted with U.S. Healthcare, we should see more inpatients and outpatients, though it's too early to tell how many more.

#### **Q Is the hospital broke?**

**A** No, the hospital is not broke, but our costs are currently too high for the local managed care marketplace. By reducing our expenses, we will be more attractive to businesses that demand high-quality care at a reasonable price. If we do not act now, we will miss an opportunity to gain managed care contracts, which will cripple us for years to come.

#### **Q Will anyone have to take a part-time position if their department is downsized?**

**A** When a unit is downsized because of decreased census or restructuring due to patient centered care, a new staffing pattern is developed based on patient needs, census and the type of staff required. All staffing patterns include full- and part-time positions. The positions are posted and filled based on qualifications and seniority. Displaced staff can bid on positions throughout the organization for which they are qualified or can be trained to fill. Sometimes employees choose a part-time position in order to remain on their unit. In other cases, displaced people may have to take a part-time job in the organization while looking for a full-time spot.

#### **Q If there are fewer staff at LVH, who is going to take care of the patients?**

**A** We need to continue looking at what we do and how we work. We have a higher staff-to-patient ratio than many other fine hospitals. Our recent Press, Ganey results show that we can streamline our work processes and improve our care. We will not compromise the quality of our care. Our ongoing cost reduction efforts are not unique. They are part of a national health care trend focused on reducing costs and improving the quality of care and service provided.

#### **Q Why do we keep buying doctors' offices if people are being laid off and we can't afford it?**

**A** Recent practice acquisitions have involved primary care physicians (ob/gyn, family practice, pediatrics) who are vital to our success. In all cases, LVHHN has been approached by these doctors who have asked to become part of our organization. The



development of Lehigh Valley Physician Group is important to LVHHN as it strengthens BOTH organizations and helps increase their value as a health care resource.

**Q Why was the old system of delivering food at 17th & Chew changed, and is the new way really worth the increased cost? How many employees were reduced for this system?**

**A** The system was changed to reduce costs and improve the food quality. The new equipment provides fresher, better quality meals at the right temperature. Since the project's implementation, five FTEs have been eliminated and additional savings are anticipated. There is no doubt that the new system provides better meals at a much lower cost.

**Q Is the increased cost of *CheckUp* worth it?**  
**A** Redesigning *CheckUp* and publishing weekly and monthly issues of the newsletter resulted from last year's employee communication survey in which staff asked for more timely information as well as in-depth discussions of key issues. So far, feedback has been quite positive regarding the format and content of *CheckUp This Week* and *CheckUp This Month*. In addition, further cost savings will result from the distribution of *CheckUp This Week* only on e-mail.

**Q The amount of paper I get from Spectrum Administrators regarding payments they have made is incredible. Why not make a monthly statement/summary?**

**A** People who have other insurance need to receive an explanation of benefits (EOB) in a timely fashion so they can forward it to their secondary carrier to pay any balance due amounts. Waiting until the end of the month isn't an acceptable option in these cases.  
Spectrum Administrators is exploring with its software vendor the possibility of "batching" the EOB forms

so an employee would receive a listing that includes all the activity for his family during each check processing time period.  
In the past year, Spectrum has eliminated paperwork in several areas. They stopped issuing EOBs for most Choice Plus and Valley Preferred prescription claims from Spectrum Pharmacy. In addition, individuals participating in the health care flexible spending (FSA) program now have the option of having their claims automatically processed for FSA reimbursement after they are processed under the health or dental plan. This eliminates some paperwork the employee previously had to file.

**Q When is the new TSU opening?**  
**A** The unit is scheduled to open in late July.  
**Q I heard this is the lowest paying institution around. Why don't we have the same pay as the other local hospitals?**

**A** Compared to the other local hospitals, our wages are higher. Although our increases in the past few years have been smaller, we continue to be the local market leader. In fact, the others see us as the benchmark to determine their pay rates.  
**Q Is ambulatory surgery moving to CC and when?**  
**A** There is currently no schedule for this move.  
**Q Paychecks are distributed at CC at 2:45 p.m. on pay day. Why are they never at 17th at 2:45 for distribution?**  
**A** As a courtesy to our employees, we distribute paychecks on Thursday afternoon, even though payday is Friday. Paychecks are distributed for departmental pickup at Cedar Crest at 2:45 p.m., at which time individuals are also allowed to pick up theirs. 17th & Chew cashiers distribute paychecks, and because of their other duties, can't distribute checks until 3 p.m. ■

• April Forums Scheduled •

The next slate of employee forums take place at the end of April. The forums will be an opportunity for Lou Liebhaber, COO, to discuss the recently announced \$13 million work force expense reduction effort with staff. He will also field questions and comments from the attendees.  
Employees are encouraged to attend one of the meetings listed below:

Date	Time	Location
Tuesday, April 23	Noon-1 p.m.	17 auditorium
Thursday, April 25	2-3 p.m.	17 auditorium
Monday, April 29	7-8 a.m.	CC auditorium
Monday, April 29	2-3 p.m.	CC auditorium
Friday, April 26	3-4 p.m.	2024 Lehigh St.
Friday, May 3	3-4 p.m.	2024 Lehigh St.

Heart Ball to Honor Hospitals' Care Givers

Nominations are being accepted until April 30 for the American Heart Association's (AHA) Excellence Awards in Cardiovascular Care, to be presented at the AHA's 1996 Heart Ball. The event takes place on June 7 at the Sheraton Jetport, Allentown.

Employees and physicians from Lehigh Valley Hospital and Health Network, and all local hospitals, are invited to attend the Heart Ball and submit nominations for the award. One care giver from each hospital will receive an award. According to the AHA, the Excellence Award in Cardiovascular Care will be given to a member of each hospital's cardiac care team who demonstrates exceptional contribution to the enhancement of quality patient care. Criteria for consideration include service to patients, families, colleagues and other customers; sensitivity in interpersonal interactions; consistency in assisting colleagues; willingness to "go the extra mile" for patients, families or one's department; and efforts to preserve and enhance human dignity of patients, families and colleagues. The AHA board of directors will review all nominations and select the award recipient at each hospital.

To nominate someone, complete a nomination form and return it to public affairs by April 30. Nomination forms and directions sheets have been distributed to department heads. They are also available through public affairs, ext. 3001.

Invitations to the Heart Ball have been distributed throughout the hospital. If you have not received an invitation and want to attend the Heart Ball, e-mail, call or page Connie Molchany, ext. 1714, or beeper 1259, or call the AHA, 867-0583. The cost of attending the dinner-dance is \$45 per person. ■

April is National Occupational Therapy Month

THE GOAL OF OCCUPATIONAL THERAPY (OT) IS TO HELP PEOPLE FUNCTION EFFECTIVELY and independently in their daily activities. Patients with a diminished ability to care for themselves due to a physical or psychiatric illness, injury or surgery benefit from a range of services provided by occupational therapists. The therapists use techniques and interventions to help patients recover lost abilities or learn alternative living skills.

In 1995, the members of Lehigh Valley Hospital's occupational therapy department taught more than 1,400 patients the skills they needed to regain physical independence and dignity in their daily lives.

Occupational therapists and certified occupational therapy assistants from the psychiatric rehabilitation department also treated patients with psychiatric disorders in the hospital's inpatient and outpatient mental health programs.

Four registered occupational therapists (OTRs), with bachelors or masters degrees in OT, provide patient care at Cedar Crest & I-78. Each OTR treats a specific type of patient, which is consistent with the patient centered care philosophy.

**Angele Tran, O.T.R.**, cares for patients on the burn unit, providing scar management, burn garment fitting and splint fabrication.

**Kris Andrulevich, O.T.R.**, is responsible for assessing, preventing and treating trauma and critical care patients for complications from immobility.

**Brian Shelton, O.T.R.**, designs and implements programs to help patients on the fourth, fifth and seventh floors recover functional abilities following illness, or vascular or orthopedic surgery.

**Katie Rife, O.T.R.**, provides OT services to neurology patients on the sixth floor suffering from multiple sclerosis, Guillain-Barre Syndrome or strokes. She is also part of the pediatric rehab team on inpatient pediatrics that treats children who have or are at risk for delayed development.

A registered occupational therapist and two certified occupational therapy assistants (COTAs) treat residents of the Transitional Skilled Unit at 17th & Chew.

**Nancy Hadjokas, O.T.R.**, establishes treatment programs for general medical and surgical patients, and victims of strokes, traumatic injuries or arthritis.

**Jackie Williamson, C.O.T.A.**, provides training to residents in self-care and home management skills to prepare them to return home.

**Meg Haney, C.O.T.A.**, teaches activities of daily living and compensatory skills needed for independent living. ■

— THANK YOU —  
*The family of George Guldin would like to express their sincere thanks to the Lehigh Valley Hospital family for all their support and contributions. Your kindness is deeply appreciated in our time of bereavement.*  
— Kathy Guldin and Family



Issues & Initiatives is a series of activities providing employees information about current health care issues at Lehigh Valley Hospital and Health Network.



Lou Liebhaber

# Issues & Initiatives

## Work Force Expense Reduction Effort Picking Up Speed

DAILY NEWS REPORTS DOCUMENT THE HARSH ECONOMIC REALITIES OF ALMOST EVERY INDUSTRY IN THE COUNTRY, AND health care seems to be making the front page lately. In late March, the Wyoming Valley Health Care System announced layoffs of about 70 people. Staff members at St. Luke's Quakertown Hospital also recently lost jobs, and Geisinger, New England Medical Center, and Miner's Memorial are laying off employees and taking other drastic steps to reduce their costs.

There is no doubt that the recently announced initiative to trim \$13 million from staffing expenses from the hospital division in fiscal year 1997 is necessary, bold and somewhat controversial in some corners. This is a difficult undertaking for all of us, but we will bear the burden together. We have made progress in reducing the non-personnel expenses of Operations Improvement, but must reduce staffing expenses in order to meet OI targets.

I was truly impressed by the suggestions I received from our staff on how our work force expense reduction efforts and Operations Improvement initiative can help LVHVN become a more cost-competitive organization. The *Issues & Initiatives* feedback forms represent the ideas of literally thousands of employees committed to the organization's success. All of the suggestions are being taken into consideration by the team of managers developing the work force expense reduction action plan. Many ideas were added to their plan, and the non-personnel expense-related ideas will become part of fiscal year 1997's initiatives. It is clear to me that many of you understand the realities of the current managed care marketplace. The responses on the forms are thoughtful and evidence of your support and acceptance of the difficult situation. This plan is being formed and will be carried out with the utmost, much-deserved respect for you.

A few powerful themes are echoed time and again on the feedback forms, including:

*"Let's all bear the burden of expense reductions together to minimize the number of positions that must be eliminated";*

*"Preserve what's most important—the quality of patient care";*

*"Continue trimming expenses not related to staffing costs";* and

*"Don't delay; start cutting some costs right away."*

In response to the last suggestion, I am pleased to inform you that the following actions have been taken:

1. Catering has been discontinued, except under limited circumstances.
2. *CheckUp This Week* is no longer printed. Instead, it is produced on e-mail, and each department head must print and post it for his employees.

3. We no longer hold off-site retreats at facilities that charge us a fee.
4. We will only spend money on spring plantings and landscaping that is donated for this purpose. All plantings will be perennials and trees so we can avoid a major new expense each year. Donations for this year's plantings came from the Lehigh Valley Hospital Auxiliary, Tsoi/Kobus and Associates, architects, and Alvin H. Butz, Inc. Routine grounds maintenance will be paid from hospital funds.
5. We postponed the OI incentive program until a more appropriate time. We feel the program is a good idea, but want to wait until the fall to kick it off.

I hope you will accept these actions as evidence that LVHVN management takes your input seriously and wishes to partner with you in the work we do.

Many suggestions on the feedback forms reflected a desire to have salaries frozen instead of cutting positions. In light of the extensive review of salary, benefit, and compensation issues by the work force expense reduction team, it was decided to put on hold the scheduled 1.5 percent increase for our nursing colleagues. No decision on the increase has been made at this time, but it will be given serious consideration by the work force expense reduction planning team that

has begun to identify the \$13 million in reductions. We believe that to implement a salary increase at this time—before the team's recommendations to senior management council—would pre-empt the planning team's efforts. We appreciate the patience and cooperation of our nursing staff.

Additional feedback from you stated how we must act if we are able to say in 18 months, "we came out of this process pretty healthy as a work force." The most common responses were:

*"We can and will work our way through this process if we are all treated with respect";*

*"We want to feel that the decisions that are made are the ones we would have made if we were in your shoes"; "We were kept informed along the way";*

*"As many jobs as possible were preserved";* and

*"Quality patient care was preserved."*

I assure you these thoughts and considerations will guide the work force expense reduction planning team's actions during the coming months.

I am certain there must be many questions on your minds about the work force expense reduction process, and I intend to follow through on the promise to keep you informed as the process unfolds.

### Who is on the action planning team?

They are members of senior management council, vice presidents, administrators, department heads, front line managers and facilitators. They were selected for this team because they represent diverse perspectives and wide constituencies at LVH. A conscious decision was made to include more middle managers than senior managers. You will know some or many of the members, but it is important that you share your ideas for the work force expense reduction initiative with your supervisor, who will convey them to the team.

The plan this group is formulating will be as fair as possible, as promised in the letter that announced it. It will be vigorously challenged by the team members before it is presented to senior management council to ensure this fairness. The strategy will not focus on a single employee group, department or benefit program, but a combination of initiatives to make it a fair and effective approach to achieving the \$13 million savings. The time line for their effort is shown in the box on page 5. The work force expense reduction planning group is divided into three work teams, each looking at a specific area from which to trim expenses:

### Programs and Services

Every hospital program and service is being assessed for its contribution to the mission and community, revenue and cost positions, and continuing viability.

## Operations Improvement

**FY 1996 GOAL  
\$20 Million**



**\$9.2  
Million  
To Date**

This gauge will appear in each issue of *CheckUp This Month* to show LVHVN's progress in working towards our FY '96 operations improvement goal.



This will require tough choices as areas once considered appropriate may not be viable in the current or future environments. But it's not all black-and-white. The decision may be to eliminate programs or, in some cases, scale them back to meet patients' and the community's needs on a different level.

Pay Practices, Compensation & Benefits

This group is evaluating the appropriateness of the current benefits package and pay practices, including on-call and overtime pay, shift and weekend differentials, and PTO. Compensation levels will be compared to the appropriate local, regional and national benchmark organizations.

Employee "perks," like cafeteria discounts, travel and education allowances and dues reimbursement are also areas in question.

Staffing Levels

This is the most challenging area to examine, because "apples-to-apples" comparisons are difficult to make. This team measures our clinical and non-clinical staffing levels against those of local, regional and national benchmarks. In many hospitals of similar size and scope, staffing levels are much leaner than ours.

A separate group from the work force expense reduction planning group is evaluating ideas listed on the *Issues & Initiatives* feedback forms that don't really fit into one of the three key areas. These items will be included in the Operations Improvement plan for FY97.

On April 19, the first three work teams will present to each other the recommendations resulting from their work. Each report will include cost savings, implementation strategies and time frames for plan roll-out. A single plan containing several initiatives will be assembled, discussed and approved, then taken to senior management council for evaluation and approval. We will report to employees no later than May 30 on the specific steps to be taken to eliminate the \$13 million in expenses.

Will employees lose jobs because of this plan?

In every opportunity we've had to communicate

AREAS BEING EXAMINED BY THE  
WORK FORCE REDUCTION TEAM

- Programs & Services
- Pay Practice, Compensation & Benefits
- Staffing Levels

with our staff, the same message has been conveyed: *every effort will be made to avoid layoffs*. We will take advantage of attrition and retraining. New job opportunities developed throughout the network—such as the doubling in size of the transitional skilled unit—will be made available.

We routinely post openings in physician offices and Affinity, and will try to form a job bank with the help of our vendors and other business partners. The work force expense reduction planning team is examining options to help people make smooth internal and external transitions. LVHHN has a history of treating everyone with dignity and respect, and this will not be compromised. Our transition to a cost-competitive organization won't be easy or pain-free, but if we want to succeed, we must trim our expenses and assure maximum value from the work we do.

Considering the outline given above on the process to identify the \$13 million in expenses, it might be obvious to some staff that they and their department will be affected by the plan. My advice to everyone is to

avoid "putting your heads in the sand." Take charge of your career: upgrade or learn new skills; apply for different jobs that open up in the organization; discover how to add value to LVHHN; and stay flexible.

Our efforts to trim expenses will continue after the \$13 million staffing-related costs are achieved, because price wars in the managed care marketplace will wage on. Continually examining how to maximize the enormous contribution each of us brings to our job while bringing our staffing costs in line with our competition is necessary to assure our continued contribution to the health of our community.

Through PennCARE<sup>SM</sup>, Valley Preferred and various partnerships with our medical staff, we are seeking and finding opportunities to lower our costs and maintain or enhance our quality of care in this relentless environment.

Many organizations fail to keep their employees informed or ask for their input at times like these. This causes fear and uncertainty for everyone. We are not that type of organization. Your contributions and opinions are important to our success. We will use every means possible to keep you informed as the process unfolds, including *CheckUp*, the employee forums, *Issues & Initiatives* sessions, letters and informal conversation.

We share a commitment to the future of Lehigh Valley Hospital and Health Network. Together we can weather the stormy days ahead and emerge a stronger, more cost-effective organization, and preserve our unswerving commitment to quality patient care. ■

WORK FORCE EXPENSE REDUCTION EFFORT • KEY EFFORTS •

- ✓ **March 21** Announced at department head meeting
- ✓ **March 22** First meeting of work force expense reduction planning team
- ✓ **April 19** Team prepares plan for SMC evaluation/approval
- April 23-May 3** Employee forums
- April 24** Work force expense reduction plan presented to SMC
- May 30 (or sooner)** Plan announced to employees

WORK FORCE EXPENSE REDUCTION PLANNING TEAM

SMC

John Fitzgibbons, M.D.  
*Chairman, Dept. of Medicine*

Vaughn Gower  
*Senior VP & CFO*

Mary Kinneman  
*Senior VP, Patient Care Services*

Robert Laskowski, M.D.  
*Senior VP, Clinical Services*

Louis Liebhaber  
*COO*

Harry Lukens  
*Senior VP & CIO*

Joseph Lyons  
*Executive Director, LVPG*

Mark Young, M.D.  
*Chairman, Community Health & Health Studies*

Vice President/  
Administrator

David Beckwith, Ph.D.  
*VP, Operations*

James Burke  
*VP, Operations*

Mary Alice Czerwonka  
*VP, Public Affairs*

William Dunstan  
*Administrator, Home Care/Hospice*

Mary Agnes Fox  
*Administrator, Patient Care Services*

Mary Kay Gooch  
*VP, Human Resources*

Department Head

Bret Bissey  
*Administrative Director*

Sharon Boley  
*Manager, Hospital Lab Operations*

Richard Cardona  
*Manager, Logistical Services*

Derek Davidson  
*Administrative Director, Department of Surgery*

Zelda Greene  
*Director, Medical Records*

David Mitchell  
*Director, Adolescent Psychology*

William Mosser  
*Director, Purchasing*

Fred Pane  
*Director, Pharmacy*

Michael Pasquale, M.D.  
*Chief, Division of Trauma*

Georgene Saliba  
*Director, Risk Management*

Kathleen Sullivan  
*Director, OHU/TOHU*

Cathy Temos  
*Director, SPD*

Front Line Managers

Chris Holmes  
*Coordinator, SPD*

Mary Beth Karoly  
*Supervisor, Pharmacy*

Kim Kemp  
*Supervisor, Phlebotomy*

Shelley Mesics  
*Director, 7A*

Greg Miller  
*Sup. Service Analyst, Purchasing*

Bernie Potetz  
*Manager, Admitting*

Core Facilitators

Terry Capuano  
*Administrator, Patient Care Services*

William Frailey, M.D.  
*VP, Care Management Systems*

Kristi Hardner  
*Operations Analyst, Organizational Development*

Ed O'Dea  
*Controller, Finance*

Lester Rosen, M.D.  
*Outcomes Management*

Keith Strawn  
*Manager, Employee I/S*



## New Pharmacy at 17th & Chew

A new outpatient pharmacy opened early this year for employees and patients at 17th & Chew. The pharmacy's hours are 8:30 a.m. to 5 p.m., Monday through Friday, and it is located on the first floor near the blue elevators.

Employees can now pay prescription bills in the pharmacy instead of the cashier's office and have their prescriptions billed directly to Spectrum Administrators. Any prescription from Health Spectrum Pharmacy at Cedar Crest & I-78 can be transferred to 17th & Chew simply by giving the prescription number to the pharmacist.

The pharmacy will participate in Medical Assistance, PACE and many other prescription plans, plus they accept MasterCard and VISA. Prescriptions will be filled while you wait. For more information, contact Chuck McConnell, ext. 2780.

## Tips for Choice Plus Members

Here are some important tips for employees with Choice Plus on referrals that can speed claims processing:

- When you have been referred to a specialist by your primary care physician (PCP), it is your responsibility to confirm that this specialist is a Choice Plus participating provider.
- Your PCP must complete the entire referral form including: participating specialist, procedures and/or tests that the specialist is authorized to perform, anticipated date of service and diagnosis.
- If the referred specialist determines additional services are necessary, they must contact your PCP for authorization and request an amended referral or new referral. It is your responsibility to confirm that this authorization has been obtained prior to having any procedure or diagnostic service performed.
- If the referred specialist recommends another professional, the PCP must be consulted prior to the visit. You are responsible for obtaining a new referral.
- Be aware of the procedures that need pre-certification by the Utilization Review Department. Your PCP has a list of these procedures.
- You should present the referral form to the specialist's office upon arrival at the office. Do not forward any copies of the referral form to Spectrum Administrators other than the Choice Plus copy.
- Services that do not require a referral from the PCP are routine gynecological exams, annual pap and routine mammograms.

If you have any questions on referral requirements or any Choice Plus procedures, call the customer service department, Spectrum Administrators, ext. 7410. ■

## Research Program Slated for Nurses' Week



Susan Houston

A HALF-DAY PROGRAM TITLED "THE CHANGING FACE OF NURSING RESEARCH," takes place May 8, 1 to 4 p.m., in the auditorium at Cedar Crest & I-78.

The free event, which is part of Nurses' Week, is co-spon-

sored by Lehigh Valley Hospital and Health Network (LVHVN), Allentown College of St. Francis de Sales, Cedar Crest College and Kutztown University.

The keynote address, "Outcomes Research: Search for Best Practice," will be presented by Susan Houston, Ph.D., R.N., director, outcomes management and research, St. Luke's Episcopal Hospital, Houston, Texas. Houston is a renowned international speaker and author.

- Cecelia Grindel, Ph.D., R.N., assistant professor, Northeastern University, Boston, will discuss "The Evolution of Nursing Research."
- Joyce Willens, Ph.D., R.N., associate professor, Villanova University, will speak on "Are Patient Outcomes Improved with Nurse Managed Epidural Analgesia?"

• Mary Jane Hanson, Ph.D., assistant professor and family nurse practitioner, Cedar Crest College, will describe "Cigarette Smoking Intention in Teenage Women: A Cross-Cultural Comparison."

• Karen Schaefer, D.N.Sc., R.N., associate professor, Allentown College of St. Francis de Sales, will describe "Health Patterns of Women with Fibromyalgia."

LVHVN staff presentations will include "Measurement and Evaluation of Organizational Innovations: Challenges and Solutions," by Yvonne Bryan, Ph.D., R.N., nurse researcher, and Kim Hitchings, M.S.N., manager, office of professional development; and "The Effect of Inpatient Comprehensive Geriatric Assessment Intervention on Patient Care Outcomes," by Lisa Lacko, M.S.N., R.N., geriatric clinical nurse specialist.

Elliot J. Sussman, M.D., president and CEO, and Mary T. Kinneman, M.S.N., senior vice president, patient care services, will welcome attendees. Mark Young, M.D., chair, department of community health and health services, will provide closing remarks.

Pre-registration is required. For more information or to register, call ext. 8257. ■

## Adolescent Psych Unit Celebrates 10 Years

The adolescent psychiatry unit recently marked its 10-year anniversary. Since March 1986, Lehigh Valley Hospital mental health professionals have treated 2,000 patients on the 11-bed unit at 17th & Chew, the region's first inpatient program for teens.

John Campion, M.D., child/adolescent psychiatrist and medical director, and Jeffrey Knauss, Ed.D., psychologist, and the unit's founder and program director, lead the unit's team of nurses, mental health technicians, psychiatric rehabilitation specialists and social workers.

According to Knauss, "The success of the unit is a tribute to the dedication, professionalism and motivation of the entire staff." ■



Original staff members of adolescent psychiatry celebrate a decade of service to troubled youths. Seated (from left): Joy Bankos, Sherrie Hummel; Standing (from left): Ed Xander, Jeffrey Knauss, Ed.D., Elaine Holmes and Liz Fox.

## JCAHO Update

JCAHO conducts mid-cycle, unannounced, random surveys on five percent of accredited organizations, and although it seems like the hospital was surveyed only yesterday, May is the mid-point between inspections. So it's important that LVH department heads and staff prepare for a visit from the Joint Commission. Over the next few weeks, please review the information used to prepare for the 1994 survey. If corrective action was needed, be sure you followed through. Results of an unannounced survey can include follow-up corrective activities or even a change in the organization's accreditation status.

Organizations selected for the one-day survey receive 24 to 48 hours advance notice. The areas on which the survey will focus this year include: medication use, medical staff credentialing, special treatment procedures like restraints and conscious sedation, management of the environment of care and patient-specific data and information.

JCAHO updates will be presented regularly in *CheckUp This Month* to discuss relevant issues regarding Joint Commission activities. A bulletin board titled "JCAHO Updates" has been established on e-mail as a second information source, and a telephone "hotline" will be set up in the near future.

For more information, or to suggest topics for JCAHO Update, contact Beverly Snyder, assistant for regulatory affairs, ext. 5210, or pager 6776. ■



## Robot "Lends a Hand" in Pharmacy

The pharmacy at Lehigh Valley Hospital, Cedar Crest & I-78, has a new team member—a robot that will eventually help distribute medications to patients in the hospital.

Rick Kerr, pharmacy resident, and leader of the robot project, said that the robot is only one part of a redesign and reengineering process that the pharmacy has undertaken to meet the needs of the changing health care environment. While the robot has many possible uses, its current job is to help fill prescriptions for inpatients.

The filling and distribution process is quite labor intensive, and currently is done by four or five technicians and one or two pharmacists. The pharmacist enters the medication information on computer and generates a list of medications required for each patient for a 24-hour period. Technicians pick these medications from shelves in the pharmacy to fill the patient

medication drawer. All drawers must then be checked by the pharmacist for the correct dose and quantity of medication, and the drawers are delivered to each unit. This process takes approximately 12 hours. With the robot's help it should take only four to five hours and involve two or three people.

Pharmacy staff are in the midst of robot training. Piloting the process with the robot will begin later this month on one patient care unit. Other units will be phased in slowly to ensure that the process runs smoothly. According to Kerr, the robot will enable the "real" staff members to handle other clinical and administrative functions. "This robot is one of only 35 nation-wide and one of only five in Pennsylvania. Technology such as this is the wave of the future in health care and the pharmacy department is striving to lead the way to become a benchmark." ■

This pharmacy robot can store 500 medications and can fill 50 drawers in 20 minutes. The metal rods along the left side hold the medications sealed in special small plastic bags that are bar-coded. Patient medication drawers, also bar-coded, are loaded onto a conveyor belt and sent into the robot to be filled. The robot reads the bar codes on the medication drawer and begins filling it with the required medications in a matter of seconds.



## Radiology Reorganizes to Face the Future

*"We are trying to stress to everyone in the department that they should treat their job as if it were their own small business"*

— Walters Eberts

LIKE MANY LEHIGH VALLEY HOSPITAL AND HEALTH NETWORK DEPARTMENTS, RADIOLOGY is changing to prepare for the future of health care. According to Walter Eberts, administrative director, radiology/diagnostic medical imaging, about 15 supervisory positions have been consolidated into five, and duties have been reassigned to create a more efficient team. Eberts says that while it is never easy to consolidate positions, radiology's new structure promotes greater employee autonomy and strengthens the idea of taking ownership of the job. For example, employees now schedule their own patients and make day-to-day decisions.

The department is also changing physically. Since late 1995, construction at Cedar Crest & I-78 has been joining the emergency and radiology departments. This will allow patients needing radiological procedures to receive them faster and in a more private setting. Phases I and II will soon be completed. The changes include an expanded reception area to accommodate more patients, updated file and record rooms, and new ultrasound areas.

"Although we are still in the midst of change, I think the team as a whole has really stepped up to the plate and is making the transition as smooth as possible," Eberts added. ■

## Celebrate National Volunteer Week: April 21-28

*Consider these outstanding examples of service from Lehigh Valley Hospital's dedicated corps of volunteers.*

In 1995 alone, over 600 volunteers donated 118,719 hours to Lehigh Valley Hospital. They delivered more than 14,000 flower arrangements to patients, worked in more than 35 different hospital departments, completed almost 50,000 errands, processed 600,000 pieces of bulk mail and delivered more than 1,500 videos to patients through patient room service.

Volunteers are also instrumental in raising money for the hospital.

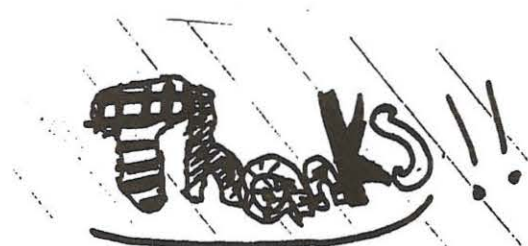
Last year The Allentown Auxiliary of Lehigh Valley Hospital and the Lehigh Valley Hospital Auxiliary raised over \$350,000 to support programs and services. These impressive statistics point to only one conclusion: volunteers at Lehigh Valley Hospital make a big difference. They are a precious resource and a valuable part of the health care team.

To all our volunteers — Thank you!

## About Our PEOPLE



Volunteer Helen Shreve celebrated her 97th birthday in March. Helen, a volunteer since 1974, has 24 grandchildren who also keep her very busy. Congratulations to Helen!



I would like to say Thank you to all the staff members that treated me.

I would like to give a special Thank you to the two people that saw me first and took me to the Hospital. I think it was Scott and Barbra. They were funny and they listened to what my Mom said. Thank you!!

Eight year old Jessica Ciulla of Walnutport was a patient recently in the emergency department at Cedar Crest and decided to fill out the patient survey form herself to say thank you to those who cared for her.





## Bulletin Board

Lehigh Valley Hospital and Health Network will participate in the **Multiple Sclerosis (MS) 150 PA Dutch Bike Tour**, Saturday and Sunday, June 22 and 23. The ride offers a choice of three round trip distances- 100, 165 and 200 miles. Fully catered rest stops, a delicious dinner and a hearty breakfast are provided for the 165 and 200 mile trips at Millersville University, plus transport vehicles, medical support, an awards ceremony and a finish-line celebration. The rides start at the Lehigh Valley Velodrome. The 100-mile option starts at Warwick Park in Chester County, Pa. Employee cyclists have already signed up, but many more are needed. The tour also needs volunteers to help at registration, rest stops and finish areas. All proceeds go to the National Multiple Sclerosis Society. If you are interested in riding, volunteering or sponsoring the Lehigh Valley Hospital and Health Network team, contact Guy Rosevelt via e-mail or through pager 1707.

It will soon be time for the annual **"Gala Celebration of Nursing."** This year's event will be May 2 at the Holiday Inn, Fogelsville. The celebration honors LVHNN nurses who in 1995 have published or presented a paper/poster; earned a baccalaureate or graduate degree; held office in a professional organization; won a professional award, scholarship or fellowship; received a grant; were appointed to a faculty, editorial board, etc; or were certified or recertified in their speciality area. All winners will be honored during Nurses' Week, May 6-10.

### Recreation Committee News

The door prize winners from the Spring Fling were:

**Smoke Detectors:** Lisa Wall, Helen Lamparella,

Jill Roseman, Mark Frontino, Wendy Fay

**Fire Extinguisher:** Carol Mutchler

**Cordless Phone:** Bill Mosser

**Computer station:** Sue Green

**Walkman:** Linda Trella

**Fax Machine:** Dennis Feters

**Airline Tickets:** Mary Karabinos

**Sports Watches:** Jeff Beisel, Vanessa Taggart, Sue Reinke, Kathleen Jones, Todd Cook, Terry Schoch, Terry Burger, Mike McClellan, Gregg Zahour, Judy Schultz

**Color Television:** John Deutsch

**Traditional Guest Chairs:** Lorraine Staruk, Vicki Girodo

**Cruise to Nowhere:** Jack Seyfried

**Stereo Rack System:** Mary Alice Czerwonka

**Brass Ring Saloon Gift Certificates:** Mary Weierbach,

Tracy Goetter

**Rookies Gift Certificates:** David Brown, Stacey Schwenn

**Spice of Life Gift Certificates:** Dawn Roth, Rick Cardona

**King George Gift Certificate:** Chris Mosser

**Book from Barclay:** Tom Trella

**Inn of the Falcon Gift Certificate:** Andrew Stasko

Special thank you to several of the hospital's vendors for the wonderful door prizes: Novacom, World Travel, Integra, CMS, Boise Cascade, Haztech Partnership, Inc., Cardinal Health Inc., Interior Workplace Design, Owens and Minor, M.W. Wood, Consolidated Communications, and Atkinson & Mullen.



More than 500 employees danced the night away at the Spring Fling!



Mr. Yuk was recently feted with a 25th birthday celebration at Lehigh Valley Hospital. Joining in the festivities were members from the pharmacy department, Cedar Crest & I-78, and staff and patients from inpatient pediatrics.

### Recreation Committee Upcoming Events

#### Uniform Sale May 13

6 a.m. to 8 p.m. in Classroom I and Anderson Wing Lobby, CC&I-78. Mill Street Apparel will offer a wide variety of uniforms. Cash, check and credit cards accepted.

For more information, call Sharon Bartz, ext. 9830.

#### Weekend in Las Vegas, Nov. 1-5

Only \$443 based on double occupancy.

Call Diane Magargal, ext. 5485 for more information.

#### Cruise to Nowhere, June 14-16

Prices range from \$249-399 plus tax and includes all meals, lodging, activities and entertainment.

Total payment is due April 30.

For more information, call Kay Zelina, ext. 9455.



## SERVICE ANNIVERSARIES

Human Resources congratulates the following employees on their April 1996 service anniversaries and thanks them for their continuing service to Lehigh Valley Hospital and Health Network.

### Twenty Years of Service

Mary Lou Cressman

PGME-Medicine

Lester C. Lauer

6C Medical/Surgical Unit

Donna Kelly

Medical Records

Sharon K. Dries

OR Centralized Scheduling

Geraldine A. Getz

Operating Room

Kim M. Sterk

Geriatrics & Helwig Diabetes

### Fifteen Years of Service

Elaine V. Bellesfield

Pediatric Unit

Catherine Glenn

Department of Surgery

Laurie Schwyer

Obstetrics and Health Promotion & Disease Prevention

Kathryn Parees

Lab-Microbiology

Barbara A. Chodur

Manch Chunk Medical Center

Theresa M. Pavlovack

Cancer Program

Helen Lamparella

Patient Accounting

### Ten Years of Service

Mary C. Karabinos

Patient Accounting

Hope Roth

Health Page

Melissa J. Buda

Heart Station

Gregory Heckler

Plant Engineering

Kenneth W. Mead

Partial Hospitalization Adolescent Psychiatric Unit

Mary Jean Osborne

Nursing Administration

Susan M. Shovlin

Financial Services

Carole J. Moretz

Nurse Staffing Office

Louis J. Temprine

Plant Engineering

Gary Williams

Plant Engineering

Antonnette A. Zenko

Radiology-Diagnostic

Shelly A. Frick

4B Medical/Surgical Unit

Colleen Granitz

Health Page

Sharon S. Fletcher

Hospice Administration & General

Michael Scott

Plant Engineering

Claranne P. Mathiesen

6B Medical/Surgical Unit

Sharon C. Pieri

3C Staging/Monitored Unit

### Five Years of Service

Barbara A. Blake

6S Adult Psychiatry Unit

Lorraine B. Gyauch

Cancer Program

Susan J. Kuss

Department of Surgery

Nadine Ritter

7B Medical/Surgical Unit

Joann Semler

4A Medical/Surgical Unit

Kim R. Zimmerman

6B Medical/Surgical Unit

Michelle Anderson

Operating Room

Lydia C. Boileau

Hospice-Skilled Nursing

Donald Klingeman

Radiology-Diagnostic

Barry Loch

Security

Amy E. Mutter

Cardiac Cath Lab

Madeline M. Starr

Heart Station

Sarah Broadhurst

Admitting Office

Jeffrey G. Gillette

MedEvac

Frank L. Ditalia

Lab-Limited Service

Robert E. White

Lab-Chemistry

Todd L. Leibenguth

Endoscopy-GI Lab

Linda L. Lewis

Dept. Of OB/GYN

Komkai Somboonsong

Pharmacy

If you've got news or a story idea for **CheckUp This Month**, send your suggestion by the first work day of the month to Rob Stevens, editor, public affairs, 1243 SCC-PA, using interoffice mail or e-mail. **CheckUp This Month** is an employee publication of Lehigh Valley Hospital and Health Network's public affairs department. For additional information, call ext. 3000. Lehigh Valley Hospital and Health Network is an equal opportunity employer. M/F/D/V